| STATE OF SOUTH CAROLINA | |) Bii : |
|--|--|---|
| • n-n- | | BEFORE THE |
| (Caption of | f Case) | PUBLIC SERVICE COMMISSION |
| Example: Application for a Class C Charter Certificate from | |) OF SOUTH CAROLINA |
| Joh | n Doe dba Doe's Limo |) TRANSPORTATION COVER SHEET |
| Request to | Cancel Class C Non Emergency | 7 7/12 - 105. T |
| Certificate | | 7013-105 T DOCKET 2013 96 T |
| | RECEIVED | NUMBER: 2010 - 261 - T |
| Bowers Sig | gnature Services, LLE | |
| • | APR -4 2013 | If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you |
| | ORS | have filed with the Commission before, a Docket Number was assigned and should be entered above. |
| (Please type o | or print) T, T, W, W/W | |
| y Submitted | by: Marilya Bowers | Stelephone: (864) 269-7888 |
| Address: | 301 EA AVE | Fax: (804) 859-9227 |
| ^ | PO BOX 1828 | Other: |
| | Egs) ey Sc 29641 | Pensii: marilyn @ bowersems.com |
| NOTE: The c | | so nor supplements the filing and service of pleadings or other papers |
| | y law. This form is required for use by the Public Service | Commission of South Carolina for the purpose of docketing and must |
| se mien our c | | North Annual Control of the Control |
| | NATURE OF ACTION | (Check an that apply) |
| Applica | tion - Class A/A Restricted | Request for Name Change on Certificate |
| Application - Class C Taxi | | Request to Amend Scope of Authority |
| Application - Class C Charter | | Request to Amend Tariff (rate increase, etc.) |
| Application - Class C Charter Bus | | Request to Amend Passenger Limit |
| Application - Class C Non-Emergency | | Request |
| Application - Class C Stretcher Van | | Exhibit |
| Application - Class E Household Goods | | Late-Filed Exhibit |
| Application - Class B Hazardous Waste | | Letter |
| Application | | Proposed Order |
| Request for Extension to Comply with Order | | Publisher's Affidavit |
| Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded | | Reservation Letter |
| | | Response |
| | | Return to Petition |
| Request for Suspension | | Other: |
| Request | for Reinstatement | |
| | | |

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.





Request for Cancellation of Certificate

| File the original with: | Mail or fax a copy to: |
|--|--|
| Public Service Commission of South Caroli Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 – 5100 FAX (803) 896-5199 | S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815 |
| DATE: NOVEMBER 8, 2012 | |
| Please consider this a request to cance | I my: |
| Class C Taxi Certificate | Class A Restricted Certificate |
| Class C Charter Certificate | RECEIVED |
| Class C Charter Bus Certificate | RECEIVED |
| Non-Emergency Certificate | APR -4 2013 |
| Class E Household Goods Certific | T,T,W,W |
| Class E Hazardous Wastes Certifi | cate |
| My Certificate Number is 8307 | |
| BOWERS SIGNATURE SERVICES LLC | DBA N/A |
| (Name of Company) | (If applicable) |
| 301 EAAve | # Po Box 1828 |
| (Street Address) | (Mailing Address If different from Street Address) |
| 06 85 A 0 0 30 1A | m Forda En 36000 |
| <u> </u> | (City, State, Zip Code) |
| | |
| | Marien to Barrers |
| | (S ignature) |
| | 8 V-President |
| | (Title) Owner, President, etc. |